

UNITED STATES DISTRICT COURT

for the
District of Minnesota

United States of America

v.

Diane L. Kroupa

Case No. CR 16-84(2) WMW/JSM

Defendant

ARREST WARRANT

To: Any authorized law enforcement officer

YOU ARE COMMANDED to arrest and bring before a United States magistrate judge without unnecessary delay
(name of person to be arrested) Diane L. Kroupa,
who is accused of an offense or violation based on the following document filed with the court:

<input checked="" type="checkbox"/> Indictment	<input type="checkbox"/> Superseding Indictment	<input type="checkbox"/> Information	<input type="checkbox"/> Superseding Information	<input type="checkbox"/> Complaint
<input type="checkbox"/> Probation Violation Petition	<input type="checkbox"/> Supervised Release Violation Petition	<input type="checkbox"/> Violation Notice	<input type="checkbox"/> Order of the Court	

This offense is briefly described as follows:

Count 1: Conspiracy to Defraud the United States, 18:371; Count 2: Tax Evasion 2009, 26:7201 and 18:2; Count 3: Tax Evasion 2010, 26:7201 and 18:2; Count 4: Making and Subscribing a False Return - 2009, 26:7206(1) and 18:2; Count 5: Making and Subscribing a False Return - 2010, 26:7206(1), and 18:2; Count 6: Obstruction of IRS Audit, 26:7212(a) and 18:2



Mary Kay Grzybek

Signature of Clerk or Deputy Clerk

Date: _____

Issuing officer's signatureCity and state: St. Paul, MN_____
Mary Kay Grzybek, Deputy Clerk
Printed name and title

Return

This warrant was received on (date) _____, and the person was arrested on (date) _____
at (city and state) _____.

Date: _____

Arresting officer's signature_____
Printed name and title

**This second page contains personal identifiers provided for law-enforcement use only
and therefore should not be filed in court with the executed warrant unless under seal.**

(Not for Public Disclosure)

Name of defendant/offender: _____

Known aliases: _____

Last known residence: _____

Prior addresses to which defendant/offender may still have ties: _____

Last known employment: _____

Last known telephone numbers: _____

Place of birth: _____

Date of birth: _____

Social Security number: _____

Height: _____ Weight: _____

Sex: _____ Race: _____

Hair: _____ Eyes: _____

Scars, tattoos, other distinguishing marks: _____

History of violence, weapons, drug use: _____

Known family, friends, and other associates (*name, relation, address, phone number*): _____

FBI number: _____

Complete description of auto: _____

Investigative agency and address: _____

Name and telephone numbers (office and cell) of pretrial services or probation officer (*if applicable*): _____

Date of last contact with pretrial services or probation officer (*if applicable*): _____